

**GOVERNOR DOYLE'S TASK FORCE TO IMPROVE ACCESS TO ORAL HEALTH**  
**APRIL 15, 2005**  
**MEETING MINUTES**

**Members Present:** Lori Barbeau, Bill Bazan, Stephanie Burrell, David Carroll, Blane Christman, Carl Eisenberg, Monica Hebl, Wendy MacDougall, Maureen Oostdik-Hurd, Midge Pfeffer, Carrie Stempski, Graciela Villadoniga

At 9:35 am, the meeting was called to order by Blane Christman and the roll was taken.

The minutes for the April 8 meeting will be sent to members and approved by an e-mail vote.

The meeting started with a presentation on the Maternal and Child Health (MCH) Block Grant budget by Millie Jones from the Department of Health and Family Services.

Each state receives federal funds according to a formula that is based on the number of children in poverty and is adjusted every ten years based on the census figures. The funds are targeted for women of reproductive age, infants and children. States are required to do a needs assessment every five years to adjust financing to the highest needs.

Wisconsin receives approximately \$11 million. \$7 million goes to local health departments to fund initiatives based on the determined needs of their communities.

Thirteen local health departments have negotiated contracts with the state for specific oral health initiatives amounting to a total of \$89,000. Local health departments may also use allocated funds from the MCH grant to hire staff or operate programs that affect oral health.

The other \$4 million is used to support state operations – staff like the State Dental Officer and the State Dental Hygiene Officer and state projects like the Children's Health Alliance.

In answering questions and discussion of the MCH Block Grant budget, several points were made:

- Federal funding for the program is decreasing.
- The needs assessment done five years ago revealed a striking unmet demand for oral health. The assessment currently in process is expected to show consistent or growing need.
- One-third of MCH funds must be used for children with special needs.
- Surveys have shown oral health as one of the highest needs for special needs children.
- The state makes performance-based contracts with local governments. If set goals are not met, the state can re-coup the funds.

The members discussed how to encourage local public health departments to increase their focus on oral health issues. The following two recommendations were made.

**The Task Force Recommends:**

- That the Governor ask the Wisconsin Dental Association and the Wisconsin Public Health Association and the Wisconsin Association of Local Health Departments and Boards to encourage dentists to consult with local health departments.
- That the Governor encourage local health departments to have at least one oral health priority.

The members also expressed concern about the decreasing focus and decreasing federal funding for oral health as well as other prevention program decreases that affect the use of MCH grant funds.

**The Task Force Recommends:**

- That the Governor ask our DC office to lobby our federal representatives to support legislative issues and federal funding for oral health initiatives.

Dr. Lori Barbeau gave a PowerPoint presentation on the Milwaukee Children's Hospital Clear Path program.

This 45-minute presentation is given by dentists at Children's Hospital to parents of children in need of a dental appointment. Families that participate in the program are guaranteed an appointment within six weeks. The program provides a "Clear Path" to oral health care.

The presentation is given two times per month in locations around the city. Participants are made aware of the program through their pediatricians, when they call for an appointment, and through the use of community fliers.

The program helps the dentists understand the pressures of the families seeking care and helps the families understand how their actions affect the dentist, the office, and the care of all clients.

After the presentation, the members worked on developing programs like Clear Path for other areas of the state. Two recommendations were made.

### **The Task Force Recommends:**

- Develop patient education materials and programs to encourage responsible use of health care systems for distribution or presentation to Medicaid-eligible clients.

Abstaining: Wendy MacDougal, Maureen Oostdik-Hurd, and Carrie Stempski.

- That the Governor, with Children's Hospital of Milwaukee and the Greater Milwaukee Dental Association, explore the expansion of Clear Path.

The Task Force members then completed recommendations on several other oral health issues.

### **The Task Force Recommends:**

- The adoption of a user fee on soda purchases (like the *Two Cents for Tooth Sense* plan) with the revenues going to the dental Medicaid program and other funding priorities as recommended by the Governor's Task Force to Improve Access to Oral Health.

Bill Bazan asked to be recorded as voting no.

- That future investments in the Medicaid program should include pay-for-performance strategies that assure increased access, regardless of the delivery system.
- That the state increase the dental Medicaid budget by \$20 million GPR per year.

#### **Yes Votes**

1. Lori Barbeau
2. Stephanie Burrell
3. David Carroll
4. Blane Christman
5. Monica Hebl
6. Mark Miller
7. Maureen Oostdik-Hurd
8. Carrie Stempski

#### **No Votes**

1. Bill Bazan
2. Carl Eisenberg
3. Curt Gielow
4. Wendy MacDougal
5. Midge Pfeffer
6. Graciela Villadoniga

The members voting no pointed to their concern that the increase in dental funding is not tied to any pay-for-performance strategy. These members expressed an understanding of the need for increased state funding for dental programs but will only support those motions that link increased funding to guarantees of increased access. Since the vote was close, the final report will include a minority report on this item.

- The continuation of the current funding level or greater for the State Physician and Dentist Loan Assistance program and the Health Care Provider Loan Assistance program.
- That the state increase the annual funding from the Higher Educational Aids Board to support annual capitation payments for 50 Wisconsin students at the Marquette University School of Dentistry. Funding would begin for the Fall 2006 semester. Year 1 cost would be an additional \$87,530.
- That the state increase the tuition subsidy for Wisconsin residents who attend Marquette University School of Dentistry from \$8,753 to \$11,670 per year at an additional cost of \$466,800 annually. Midge Pfeffer asked to be recorded as voting no.
- That the state provide funding for portable/mobile equipment at each DHFS region to be used in school-based and community oral health programs for restorative and prevention services.
- That DHFS develop a form for distribution to HMO dental system patients unable to access dental care. The form needs to include information about whom to contact when they are unable to access service within 90 days for non-urgent care and within 24 hours for urgent care.
- Encourage the Department of Public Instruction to join with DHFS to work together to expand the number of oral health collaborations between school districts and local health departments.
- Encourage the Department of Public Instruction with the assistance of DHFS to implement an oral health curriculum available to all state school districts with the goal of 20% participation by 2007.
- Coordinate EPSDT (Early and Periodic Screening, Detection, and Treatment – HealthCheck) periodicity schedule with AAPD (American Academy of Pediatric Dentistry), and AAP (American Academy of Pediatrics) recommendations, which changes the age of the first screening from age 3 to age 1.  
Dr. Carl Eisenberg asked to be recorded as voting no.

The Task Force members made several suggestions for the final report.

- Include 2010 Health Priorities.
- Include a section for comments by members.
- Add timelines and goals to the recommendations where applicable. Include action items when possible.

The members still feel the need to address several topics:

- Health teachers need more than an oral health curriculum. They need training in how to present it to students, possibly at regular teacher conferences.
- The Task Force needs to come up with a stronger, more specific direction on oral health for local public health departments.

E-mail votes will be taken on two final items before the public hearing.

- ABCD-like program options for Wisconsin will be developed by DHFS staff and sent to members for an e-mail vote.
- Expanded delegation of duties by dentists. Kay Lund will send Task Force members the Legislative Council language and description.

The Task Force adjourned the meeting at 2:40 p.m.

The remaining Task Force meetings are scheduled for:

Friday, May 13 – Public Hearing at the State Capitol, Room 411 South  
Tuesday, May 24 (2 pm to 4 pm) – Final Report